

**Fill in this information to identify the case:**Debtor name Livingston Township Fund One, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 6, 2023**X /s/ Michael Bollenbacher**

Signature of individual signing on behalf of debtor

**Michael Bollenbacher**

Printed name

**Managing Member (See Attached)**

Position or relationship to debtor

Livingston Township Fund One, LLC  
Title of Authorized Representative

Mike Bollenbacher, as a Managing Member of Los Robles MS Investment Properties, LLC, which is the Manager of Livingston Township Management, LLC, which is the Manager of Livingston Township Fund One, LLC.

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MISSISSIPPI**

Case number (if known): \_\_\_\_\_

☐ Check if this is an  
amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
SBA P.O. Box 3918 Portland, OR 97208						<b>\$113,000.00</b>
USDA Rural Development P.O. Box 66879 Saint Louis, MO 63166		Guaranty on BOM	Contingent Unliquidated			<b>\$0.00</b>

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☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b>	
Copy line 88 from <i>Schedule A/B</i> .....	\$ <u>5,600,000.00</u>
<b>1b. Total personal property:</b>	
Copy line 91A from <i>Schedule A/B</i> .....	\$ <u>552,900.00</u>
<b>1c. Total of all property:</b>	
Copy line 92 from <i>Schedule A/B</i> .....	\$ <u>6,152,900.00</u>

**Part 2: Summary of Liabilities**

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <u>4,619,202.40</u>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b>	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <u>0.00</u>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b>	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <u>1,170,138.00</u>
<b>4. Total liabilities</b> .....	
Lines 2 + 3a + 3b	\$ <u>5,789,340.40</u>

**Fill in this information to identify the case:**Debtor name Livingston Township Fund One, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Guaranty BankChecking\$2,800.003.2. Wells FargoChecking\$100.00**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$2,900.00****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

**11. Accounts receivable**



Debtor Livingston Township Fund One, LLC Case number (If known) \_\_\_\_\_  
Name

55.1. Approximately 5  
acres with 4  
commercial buildings \$0.00 \$5,600,000.00

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
 Copy the total to line 88.

\$5,600,000.00

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☐ No  
☒ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes Fill in the information below.

Debtor Livingston Township Fund One, LLC  
Name

Case number (If known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$2,900.00</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$550,000.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$5,600,000.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$552,900.00</u>	+ 91b. <u>\$5,600,000.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$6,152,900.00</u>



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☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	<b>Bank of Montgomery</b> <small>Creditor's Name</small>  <b>P.O. Box 7294</b> <b>Natchitoches, LA 71457</b> <small>Creditor's mailing address</small>  <small>Creditor's email address, if known</small>  <b>Date debt was incurred</b>  <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>Approximately 5 acres with 4 commercial buildings</b>  Describe the lien  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$4,619,202.40</b>	<b>\$5,600,000.00</b>

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$4,619,202.40**  
**0**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
<b>Bank of Montgomery</b> <b>c/o Jim Spencer, Esq.</b> <b>P.O. Box 650</b> <b>Jackson, MS 39205</b>	Line <u>2.1</u>	

Debtor	<u>Livingston Township Fund One, LLC</u>	Case number (if known)	<u></u>
	<small>Name</small>		
	<b>Bank of Montgomery</b>	Line	<u>2.1</u>
	<b>c/o Erin McManus, Esq.</b>		
	<b>P.O. Box 650</b>		
	<b>Jackson, MS 39205</b>		

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Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<b>Nonpriority creditor's name and mailing address</b> <b>Ashford Family Enterp.</b> <b>c/o John Clay</b> <b>208 Sunset Circle</b> <b>Madison, MS 39110</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$50,000.00</b>
3.2	<b>Nonpriority creditor's name and mailing address</b> <b>Basile Trust</b> <b>c/o Steve Basile</b> <b>5826 Burton Ave.</b> <b>San Gabriel, CA 91775</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$50,000.00</b>
3.3	<b>Nonpriority creditor's name and mailing address</b> <b>Bennie Bostic</b> <b>102 Ivy Brook Dr.</b> <b>Madison, MS 39110</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$50,000.00</b>
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>Bollenbacher Family Tr</b> <b>c/o Jonna Bollenbacher</b> <b>5430 Calhoun Ave.</b> <b>Sherman Oaks, CA 91401</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>\$330,000.00</b>

Debtor <b>Livingston Township Fund One, LLC</b> Name		Case number (if known)	
3.5	<b>Nonpriority creditor's name and mailing address</b> <b>David Speck</b> <b>760 Fountain Springs</b> <b>Glendora, CA 91741</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$150,000.00</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Equity Trust Co.</b> <b>c/o Chris Koob</b> <b>4389 Mason Montgomery</b> <b>Mason, OH 45040</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100,000.00</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Evergreen Trust</b> <b>Attn: Ruby Chou</b> <b>P.O. Box 1121</b> <b>Palos Verdes Pen, CA 90274</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100,000.00</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Juan Quintero</b> <b>540 De Sales St.</b> <b>San Gabriel, CA 91775</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25,000.00</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Mario Arazon</b> <b>647 N. Main St., Ste B</b> <b>Riverside, CA 92501</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25,000.00</b>
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Mark Flewelling</b> <b>2555 Boulder Rd.</b> <b>Altadena, CA 91001</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$50,000.00</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Michael L. Sharpe</b> <b>6730 Huasna Road</b> <b>Arroyo Grande, CA 93420</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>

Debtor	<b>Livingston Township Fund One, LLC</b> <small>Name</small>	Case number (if known)	
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<b>3.12</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Mike Bollenbacher</b> <b>330 Glen Summer Road</b> <b>Pasadena, CA 91105</b>  Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$27,138.00</b>
<b>3.13</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Robert Yamamoto</b> <b>1787 Roosevelt Ave.</b> <b>Altadena, CA 91001</b>  Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
<b>3.14</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Sam Grissom</b> <b>Douglas S. Vocelle</b> <b>104 Noah's Mill Rd.</b> <b>Madison, MS 39110</b>  Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$100,000.00</b>
<b>3.15</b>	<b>Nonpriority creditor's name and mailing address</b> <b>SBA</b> <b>P.O. Box 3918</b> <b>Portland, OR 97208</b>  Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$113,000.00</b>
<b>3.16</b>	<b>Nonpriority creditor's name and mailing address</b> <b>Thomas D. Landrum</b> <b>104 Chestnut Hills Rd.</b> <b>Madison, MS 39110</b>  Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
<b>3.17</b>	<b>Nonpriority creditor's name and mailing address</b> <b>USDA Rural Development</b> <b>P.O. Box 66879</b> <b>Saint Louis, MO 63166</b>  Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Guaranty on BOM</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

<small>Name and mailing address</small>	<small>On which line in Part1 or Part 2 is the related creditor (if any) listed?</small>	<small>Last 4 digits of account number, if any</small>

Debtor **Livingston Township Fund One, LLC**

Case number (if known) \_\_\_\_\_

Name

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

4.1 **SBA**  
**% Drew Norwood**  
**501 E Court St #4.430**  
**Jackson, MS 39201**

Line **3.15**

—

☐ Not listed. Explain \_\_\_\_\_

4.2 **USDA**  
**c/o Drew Norwood**  
**501 E Court St. S4.430**  
**Jackson, MS 39201**

Line **3.17**

—

☐ Not listed. Explain \_\_\_\_\_**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.**

5a. Total claims from Part 1

5a. \$ **0.00**

5b. Total claims from Part 2

5b. + \$ **1,170,138.00**

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$ **1,170,138.00**

**Fill in this information to identify the case:**Debtor name **Livingston Township Fund One, LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF MISSISSIPPI**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal**Property*

(Official Form 206A/B).

**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest **26,000 sq. feet, Bar with minimal food service**  
 State the term remaining **\$3,000.00 per month**  
**Expires 6/30/2028**  
 List the contract number of any government contract \_\_\_\_\_

**Briar Patch**  
**1150 Old Cedars Lane**  
**Suite A**  
**Forest, MS 39074**

2.2. State what the contract or lease is for and the nature of the debtor's interest **1400 sq. feet**  
**\$2,445.00 per month**  
 State the term remaining **Expires 9/30/2024**  
 List the contract number of any government contract \_\_\_\_\_

**Cedar Rose, LLC**  
**114 Livingston Chur Rd**  
**Suite 2D**  
**Flora, MS 39071**

2.3. State what the contract or lease is for and the nature of the debtor's interest **4,600 sq. feet of restaurant space**  
**\$6,600.00 per month**  
 State the term remaining **Expires 6/16/2026**  
 List the contract number of any government contract \_\_\_\_\_

**E&N, LLC**  
**115 Livingston Church**  
**Flora, MS 39071**

2.4. State what the contract or lease is for and the nature of the debtor's interest **1,100 sq. feet of space**  
**\$1,604.00 per month**  
 State the term remaining **Expires 9/30/2026**  
 List the contract number of any government contract \_\_\_\_\_

**Livingston Candy & Cre**  
**1150 Od Cedars Lane**  
**Flora, MS 39071**

Debtor 1 **Livingston Township Fund One, LLC**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.5. State what the contract or lease is for and the nature of the debtor's interest **1,797 sq. feet of retail space  
\$3,021.41 per month**

State the term remaining

**Expires 9/30/2028**

**Livingston Cellars, LL  
1150 Old Cedars Lane  
Suite B  
Columbus, MS 39701**

List the contract number of any government contract \_\_\_\_\_

2.6. State what the contract or lease is for and the nature of the debtor's interest **2,300 sq. feet of retail space  
\$4,817.00 per month**

State the term remaining

**Expires 11/2023**

**Livingston Viking  
1030 Market Street  
Flora, MS 39071**

List the contract number of any government contract \_\_\_\_\_

2.7. State what the contract or lease is for and the nature of the debtor's interest **Office space.  
\$1,150.00 per month**

State the term remaining

**Expires 1/31/2027**

**Mike Marshall  
116 Livingston Chur Rd  
Suite C  
Flora, MS 39071**

List the contract number of any government contract \_\_\_\_\_

2.8. State what the contract or lease is for and the nature of the debtor's interest **Office/Retail  
\$500.00 per month**

State the term remaining

**Expires 2/28/2025**

**Mitzi Wilinon  
116 Livingston Chur Rd  
Flora, MS 39071**

List the contract number of any government contract \_\_\_\_\_

2.9. State what the contract or lease is for and the nature of the debtor's interest **1425 sq. feet of retail space  
\$2,755.00 per month**

State the term remaining

**Expires 3/31/2026**

**Palmetto  
114 Livingst Chur Rd  
Unit C  
Flora, MS 39071**

List the contract number of any government contract \_\_\_\_\_



Debtor 1 **Livingston Township Fund One, LLC**  
First Name Middle Name Last Name

Case number *(if known)* \_\_\_\_\_

**Additional Page if You Have More Contracts or Leases**

<b>2. List all contracts and unexpired leases</b>	<b>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</b>
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2.10.	State what the contract or lease is for and the nature of the debtor's interest	<b>8,800 sq. feet retail and restaurant space</b> <b>\$17,512.00 per month</b>	
	State the term remaining	<b>Expires 1/31/2025</b>	
	List the contract number of any government contract	_____	<b>The Gathering</b> <b>106 Livingston Chur Rd</b> <b>Flora, MS 39071</b>

**Fill in this information to identify the case:**Debtor name Livingston Township Fund One, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

2.1 **Michael L. Sharpe** **6730 Huasna Road**  
**Arroyo Grande, CA 93420**

**Bank of Montgomery**

☒ D 2.1  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.2 **Mike Bollenbacher** **330 Glen Summer Road**  
**Pasadena, CA 91105**

**Bank of Montgomery**

☒ D 2.1  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.3 **Robert Yamamoto** **1787 Roosevelt Avenue**  
**Altadena, CA 91001**

**Bank of Montgomery**

☒ D 2.1  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

2.4 **Thomas D. Landrum** **104 Chestnut Hills Rd.**  
**Madison, MS 39110**

**Bank of Montgomery**

☒ D 2.1  
☐ E/F \_\_\_\_\_  
☐ G \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name Livingston Township Fund One, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****For prior year:**  
From **1/01/2022** to **12/31/2022****Sources of revenue**  
Check all that apply☒ Operating a business☐ Other \_\_\_\_\_**Gross revenue**  
(before deductions and exclusions)**\$470,635.16****For year before that:**  
From **1/01/2021** to **12/31/2021**☒ Operating a business☐ Other \_\_\_\_\_**\$-37,059.60****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**  
*Check all that apply*

Debtor **Livingston Township Fund One, LLC**

Case number (if known) \_\_\_\_\_

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Bank of Montgomery	Foreclosure		<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None
**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

Debtor Livingston Township Fund One, LLC

Case number (if known) \_\_\_\_\_

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>		

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☐ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value

**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.☐ Yes. Fill in the information below.

Debtor Livingston Township Fund One, LLC

Case number (if known) \_\_\_\_\_

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☐ None

Depository institution name and address

Names of anyone with access to it  
Address

Description of the contents

Does debtor still have it?

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address

Names of anyone with access to it

Description of the contents

Does debtor still have it?

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Debtor Livingston Township Fund One, LLC

Case number (if known) \_\_\_\_\_

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

22. **Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. **Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. **Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. **Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed

26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. <b>Robert Yamamoto 1787 Roosevelt Avenue Altadena, CA 91001</b>	<b>1/2023-9/1/2023</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Debtor Livingston Township Fund One, LLC

Case number (if known) \_\_\_\_\_

Name and address		If any books of account and records are unavailable, explain why
26c.1.	<b>Michael Bollenbacher</b> <b>330 Glen Summer Road</b> <b>Pasadena, CA 91105</b>	<b>Only has possession of records since September 1, 2023 as that is when he took over management.</b>
26c.2.	<b>Lisa Ellison</b> <b>7021/2 Brent Avenue</b> <b>South Pasadena, CA 91030</b>	<b>Only has records since September 1, 2013</b>

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. <b>Bank of Montgomery</b>

## 27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No  
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

## 28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
<b>See Attached</b>			

## 29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No  
☐ Yes. Identify below.

## 30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

## 31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--



Debtor Livingston Township Fund One, LLCCase number *(if known)* \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

**Name of the pension fund****Employer Identification number of the pension fund**

Debtor Livingston Township Fund One, LLC

Case number (if known) \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 6, 2023/s/ Michael Bollenbacher

Signature of individual signing on behalf of the debtor

Michael Bollenbacher

Printed name

Position or relationship to debtor Managing Member (See Attached)

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No☒ Yes

Livingston Township Fund One, LLC  
Title of Authorized Representative

Mike Bollenbacher, as a Managing Member of Los Robles MS Investment Properties, LLC, which is the Manager of Livingston Township Management, LLC, which is the Manager of Livingston Township Fund One, LLC.

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**Southern District of Mississippi**

In re Livingston Township Fund One, LLC

Debtor(s)

Case No.

Chapter

11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<u>0.00</u>
Prior to the filing of this statement I have received .....	\$	<u>0.00</u>
Balance Due .....	\$	<u>0.00</u>

2. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

November 6, 2023

*Date*

/s/ EILEEN N. SHAFFER

EILEEN N. SHAFFER

*Signature of Attorney*

**ATTORNEY AT LAW**

**P O BOX 1177**

**JACKSON, MS 39215-1177**

**(601) 969-3006 Fax: (601) 949-4002**

**eshaffer@eshaffer-law.com**

*Name of law firm*

**United States Bankruptcy Court  
Southern District of Mississippi**

In re Livingston Township Fund One, LLC

Debtor(s)

Case No.  
Chapter11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
<b>Ashford Family Enterp. c/o John Clay 208 Sunset Circle Madison, MS 39110</b>			<b>3.79%</b>
<b>Basile Trust c/o Steve Basile 5826 Burton Ave. San Gabriel, CA 91775</b>			<b>3.79%</b>
<b>Bennie Bostic 102 Ivy Brook Dr. Madison, MS 39110</b>			<b>3.79%</b>
<b>Bollenbacher Family Tr c/o Jonna Bollenbacher 5430 Calhoun Ave. Sherman Oaks, CA 91401</b>			<b>7.59%</b>
<b>David Speck 760 Fountain Springs Glendora, CA 91741</b>			<b>11.38</b>
<b>Equity Trust Co. c/o Chris Koob 4389 Mason Montgomery Mason, OH 45040</b>			<b>7.59%</b>
<b>Evergreen Trust Attn: Ruby Chou P.O. Box 1121 Palos Verdes Peninsula, CA 90274</b>			<b>7.59%</b>
<b>Juan Quintero 540 De Sales St. San Gabriel, CA 91775</b>			<b>1.90%</b>
<b>Livingston Township Management, LLC 1787 Roosevelt Ave. Altadena, CA 91001</b>			
<b>Los Robles MS Investment Prop., LLC 1787 Roosevelt Ave. Altadena, CA 91001</b>			

In re: **Livingston Township Fund One, LLC**

Case No. \_\_\_\_\_

Debtor(s)

**LIST OF EQUITY SECURITY HOLDERS**

(Continuation Sheet)

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
<b>Mario Arazon</b> <b>647 N. Main St., Ste B</b> <b>Riverside, CA 92501</b>			<b>1.90%</b>
<b>Mark Flewelling</b> <b>2555 Boulder Rd.</b> <b>Altadena, CA 91001</b>			<b>3.79%</b>
<b>Mike Bollenbacher</b> <b>330 Glen Summer Rd.</b> <b>Pasadena, CA 91105</b>	<b>Managing Member</b>		<b>10.62%</b>
<b>Robert Yamamoto</b> <b>1787 Roosevelt Ave.</b> <b>Altadena, CA 91001</b>	<b>Managing Member</b>		<b>.24%</b>
<b>Sam Grissom</b> <b>Douglas S. Vocelle</b> <b>104 Noah's Mill Rd.</b> <b>Madison, MS 39110</b>			<b>7.59z5</b>

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Managing Member (See Attached)** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **November 6, 2023**Signature **/s/ Michael Bollenbacher**  
**Michael Bollenbacher**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*

Livingston Township Fund One, LLC  
Title of Authorized Representative

Mike Bollenbacher, as a Managing Member of Los Robles MS Investment Properties, LLC, which is the Manager of Livingston Township Management, LLC, which is the Manager of Livingston Township Fund One, LLC.

**United States Bankruptcy Court  
Southern District of Mississippi**

In re Livingston Township Fund One, LLC

Debtor(s)

Case No.

Chapter

11

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Livingston Township Fund One, LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

**Livingston Township  
Management, LLC  
1787 Roosevelt Ave.  
Altadena, CA 91001**

**Los Robles MS  
Investment Prop., LLC  
1787 Roosevelt Ave.  
Altadena, CA 91001**

☐ None [*Check if applicable*]

**November 6, 2023**

Date

**/s/ EILEEN N. SHAFFER**

**EILEEN N. SHAFFER**

Signature of Attorney or Litigant

Counsel for Livingston Township Fund One, LLC

**ATTORNEY AT LAW**

**P O BOX 1177**

**JACKSON, MS 39215-1177**

**(601) 969-3006 Fax: (601) 949-4002**

**eshaffer@eshaffer-law.com**